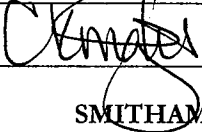


SIGNATURE 		
FIRM <b>SMITHAMUNDSEN LLC</b>		
STREET ADDRESS <b>150 NORTH MICHIGAN AVENUE, SUITE 3300</b>		
CITY/STATE/ZIP <b>CHICAGO, IL 60601</b>		
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) <b>6276278</b>	TELEPHONE NUMBER <b>(312) 894-3200</b>	
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS.		
RETAINED COUNSEL <input type="checkbox"/>		APPOINTED COUNSEL <input checked="" type="checkbox"/>